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Entered 04/27/09 18:34:51 Case 09-15084 Doc 1 Filed 04/27/09 Desc Main Document Page 1 of 37 B22A (Official Form 22A) (Chapter 7) (01/08) According to the calculations required by this statement: ☐ The presumption arises In re: Beireis, Chom The presumption does not arise Debtor(s) (Check the box as directed in Parts I, III, and VI of this statement.) Case Number: _ (If known)

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

| | | | Part I. EXCLUSION FOR DISABLED VI | ETERANS AND NON-CONSUM | ER DEBTOR | S | | | | |
|---|--|---|--|--|----------------------------|--------------------------------|--|--|--|--|
| | 1A | Vete | If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. | | | | | | | |
| Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 32 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)). | | | | | | | | | | |
| | If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. D complete any of the remaining parts of this statement. | | | | | | | | | |
| | | | eclaration of non-consumer debts. By checking | this box, I declare that my debts are no | t primarily cons | umer debts. | | | | |
| | | | Part II. CALCULATION OF MONTH | LY INCOME FOR § 707(b)(7) E | XCLUSION | | | | | |
| | | | ital/filing status. Check the box that applies and c | - | statement as di | ected. | | | | |
| | | a. Vunmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. | | | | | | | | |
| | | b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income") for Lines 3-11. | | | | | | | | |
| | 2 | c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11. | | | | | | | | |
| | | d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. | | | | | | | | |
| | | the si mont | igures must reflect average monthly income receiv ix calendar months prior to filing the bankruptcy of h before the filing. If the amount of monthly incor- divide the six-month total by six, and enter the res | ase, ending on the last day of the ne varied during the six months, you | Column A Debtor's Income | Column B Spouse's Income | | | | |
| | 3 | Gros | s wages, salary, tips, bonuses, overtime, commi | ssions. | \$ | \$ | | | | |
| | 4 | a and one b | me from the operation of a business, profession denter the difference in the appropriate column(s) business, profession or farm, enter aggregate number himent. Do not enter a number less than zero. Do not enter a deduction in Part V | | | | | | | |
| | | a. | Gross receipts | \$ | | | | | | |
| | | b. | Ordinary and necessary business expenses | \$ | | | | | | |
| | | c. | Business income | Subtract Line b from Line a | \$ | \$ | | | | |

| | Officia | | | | | | | | | |
|----|---|--|---|--|--|--|---|--|-----------|------------------------------------|
| | diffe | and other real property income. rence in the appropriate column(s) of nclude any part of the operating of V. | s than zero. Do | | | | | | | |
| 5 | a. Gross receipts \$ | | | | | | | | | |
| | b. | Ordinary and necessary operating | expenses | \$ | | | | | | |
| | c. | Rent and other real property incom | ne | Subtract L | ine b froi | n Line a | \$ | ĺ | \$ | |
| 6 | Inter | rest, dividends, and royalties. | | | | <u>'</u> | \$ | | \$ | |
| 7 | | ion and retirement income. | | | | | \$ | | \$ | |
| 8 | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. | | | | | | \$ | | \$ | |
| 9 | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in | | | | | | | | | |
| | clai | employment compensation med to be a benefit under the cial Security Act | Debtor \$ | | Spouse | 5 | \$ | | \$ | |
| 10 | Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. | | | | | | | | | |
| | a. | Assistance from Family | | | | \$ 1,500.00 | | | | |
| | b. | | | | b. | | | | | |
| | | al and enter on Line 10 | Total and enter on Line 10 | | | | | | * | |
| 11 | Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s). | | | | | | \$ 1,5 | 500.00 | \$ | |
| | | if Column B is completed, add Line | s 3 through 10 | in Column | B. Enter | the total(s). | | 500.00 | | |
| 12 | Tota Line | | 707(b)(7). If Co B, and enter the | in Column olumn B ha | B. Enter | the total(s). | | | | 1,500.00 |
| 12 | Tota Line | if Column B is completed, add Line I Current Monthly Income for § 7 11, Column A to Line 11, Column I pleted, enter the amount from Line 1 | s 3 through 10 707(b)(7). If CoB, and enter the 1, Column A. | in Column olumn B ha e total. If Co | B. Enter s been corolumn B l | the total(s). | \$ 1,5 | | | 1,500.00 |
| 12 | Tota Line comp | if Column B is completed, add Line I Current Monthly Income for § 7 11, Column A to Line 11, Column I pleted, enter the amount from Line 1 | s 3 through 10 707(b)(7). If Co B, and enter the 1, Column A. | in Column olumn B ha e total. If Co | B. Enter s been conclumn B l | mpleted, add has not been | \$ 1,5 \$ | 500.00 | \$ | 1,500.00 |
| | Annu 12 ar Appl house | If Column B is completed, add Line Current Monthly Income for § 7 11, Column A to Line 11, Column I bleted, enter the amount from Line 1 Part III. AP | s 3 through 10 707(b)(7). If Co B, and enter the 1, Column A. PLICATION for § 707(b)(7 | in Column olumn B ha e total. If Co N OF § 707 O. Multiply Family incorr | B. Enter so been conclumn B late amount the amount the for the | mpleted, add has not been EXCLUSION Int from Line 12 to applicable state | \$ 1,5 | 500.00 | \$ | |
| 13 | Annu 12 ar Appl house the b | I Current Monthly Income for § 7 11, Column A to Line 11, Column I bleted, enter the amount from Line 1 Part III. AP ualized Current Monthly Income and enter the result. licable median family income. Enterhold size. (This information is available) | s 3 through 10 707(b)(7). If Co B, and enter the 1, Column A. PLICATION for § 707(b)(7) er the median fallable by family | in Column olumn B ha e total. If Co N OF § 707 O. Multiply Family incorr | B. Enter so been conclumn B late amount the amount for the two states of the states of | mpleted, add has not been EXCLUSION Int from Line 12 to applicable state | \$ 1,5 | 500.00 sheet | \$ | |
| 13 | Annual 12 ar Appl house the b a. En Appl | I Current Monthly Income for § 7 11, Column A to Line 11, Column I bleted, enter the amount from Line 1 Part III. AP ualized Current Monthly Income and enter the result. licable median family income. Enterethold size. (This information is availankruptcy court.) ter debtor's state of residence: Illing lication of Section707(b)(7). Check | s 3 through 10 707(b)(7). If CoB, and enter the 1, Column A. PLICATION for § 707(b)(7) er the median foliable by family ois the applicable | in Column olumn B ha e total. If Co N OF § 707). Multiply family incorr y size at www e box and pro- | B. Enter so been concolumn B late amount the amount me for the sw.usdoj.g | mpleted, add has not been EXCLUSION Int from Line 12 to applicable state gov/ust/ or from to debtor's householdirected. | \$ 1,5 | 500.00 sheet states | \$ | 18,000.00 44,673.00 |
| 13 | Annu 12 ar Appl house the b a. En Appl | I Current Monthly Income for § 7 11, Column A to Line 11, Column I bleted, enter the amount from Line 1 Part III. AP ualized Current Monthly Income and enter the result. licable median family income. Enterhold size. (This information is availankruptcy court.) ter debtor's state of residence: Illing | s 3 through 10 707(b)(7). If Co B, and enter the 1, Column A. PLICATION for § 707(b)(7) er the median f dable by family bis t the applicable a or equal to th statement, and | in Column B has a total. If Column B has a total. If Column B has a total of Column B has a total of Column B has a total of Column B has a total column B h | B. Enter of seen corollaring B land of the amount of the for the roceed as on Line 1 Part VIII; | che total(s). Impleted, add has not been EXCLUSION Int from Line 12 to applicable state has applicable state ha | \$ 1,5 sy the numeral and the clerk of the c | 500.00 sheet | \$ pption | 18,000.00 44,673.00 In does |

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|---|--|--|---------------------------|-----------|-----------------|-------------------|---|----|
| | | Part IV. CALCULATI | ON OF CURR | RENT | MONTHLY | INCOME FO | OR § 707(b)(2) | |
| 16 | Enter | the amount from Line 12. | | | | | | \$ |
| Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. S | | | | | | | \$ | |
| 18 | Curre | ent monthly income for § 707 | (b)(2). Subtract I | Line 17 | from Line 16 | and enter the re | sult. | \$ |
| Part V. CALCULATION OF DEDUCTIONS FROM INCOME Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) | | | | | | | | |
| 19A | Nation | nal Standards: food, clothing nal Standards for Food, Clothin lable at www.usdoj.gov/ust/ or | g and Other Item | ns for th | ne applicable l | nousehold size. (| | \$ |
| National Standards: health care. Enter in Line a1 below the amount from IRS National Stan Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of your household who are under 65 years of age, and enter in Line b2 the number of members of household who are 65 years of age or older. (The total number of household members must be the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for house members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain health care amount, and enter the result in Line 19B. | | | | | | | nal Standards for ble at r of members of s of your t be the same as busehold total amount for | |
| | Household members under 65 years of age | | | Hou | sehold memb | ers 65 years of | age or older | |
| | a1. | Allowance per member | | a2. | Allowance p | per member | | |
| | b1. | Number of members | | b2. | Number of 1 | nembers | | |
| | c1. | Subtotal | | c2. | Subtotal | | | \$ |
| 20A | Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing | | | | | | | \$ |
| Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero. 20B a. IRS Housing and Utilities Standards; mortgage/rental expense b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42 \$ Subtract Line b from Line a subtract Line | | | | | | | \$ | |

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| 21 | Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: | | | | | | | |
|-----|---|---------------------|--|--|--|--|--|--|
| | | \$ | | | | | | |
| | Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. | | | | | | | |
| | Check the number of vehicles for which you pay the operating expenses or for which the expenses are included as a contribution to your household expenses in Line 8. | operating | | | | | | |
| 22A | $\square 0 \square 1 \square 2$ or more. | | | | | | | |
| | If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk | | | | | | | |
| | of the bankruptcy court.) Local Standards: transportation; additional public transportation expense. If you pa | \$ ay the operating | | | | | | |
| 22B | expenses for a vehicle and also use public transportation, and you contend that you are en additional deduction for your public transportation expenses, enter on Line 22B the "Pub | atitled to an | | | | | | |
| | Transportation" amount from IRS Local Standards: Transportation. (This amount is avail www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | | | | |
| | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the numl which you claim an ownership/lease expense. (You may not claim an ownership/lease expense than two vehicles.) | | | | | | | |
| | \square 1 \square 2 or more. | | | | | | | |
| 23 | Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero. | | | | | | | |
| | a. IRS Transportation Standards, Ownership Costs \$ | | | | | | | |
| | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 \$ | | | | | | | |
| | c. Net ownership/lease expense for Vehicle 1 Subtract Line | e b from Line a | | | | | | |
| | Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this I checked the "2 or more" Box in Line 23. | Line only if you | | | | | | |
| 24 | Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. | | | | | | | |
| | a. IRS Transportation Standards, Ownership Costs, Second Car \$ | | | | | | | |
| | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 \$ | | | | | | | |
| | C Net ownership/lease expense for Vehicle 2 Subtract Line | h from Line a | | | | | | |

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|--|--|--|----|--|--|--|--|
| 25 | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for a federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employme taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. | | | | | | |
| 26 | Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. | | | | | | |
| 27 | Other Necessary Expenses: life insurance. Enter total average of for term life insurance for yourself. Do not include premiums for whole life or for any other form of insurance. | | \$ | | | | |
| 28 | Other Necessary Expenses: court-ordered payments. Enter the required to pay pursuant to the order of a court or administrative payments. Do not include payments on past due obligations in | agency, such as spousal or child support | \$ | | | | |
| 29 | Other Necessary Expenses: education for employment or for child. Enter the total average monthly amount that you actually employment and for education that is required for a physically or whom no public education providing similar services is available. | xpend for education that is a condition of mentally challenged dependent child for | \$ | | | | |
| Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. | | | | | | | |
| 31 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. | | | | | | |
| Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. | | | | | | | |
| 33 | Total Expenses Allowed under IRS Standards. Enter the total | of Lines 19 through 32. | \$ | | | | |
| | Subpart B: Additional Expense Dec Note: Do not include any expenses that y | | | | | | |
| 34 | Health Insurance, Disability Insurance, and Health Savings A expenses in the categories set out in lines a-c below that are reason spouse, or your dependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34 If you do not actually expend this total amount, state your actually expended the space below: \$ | snably necessary for yourself, your \$ \$ \$ | \$ | | | | |
| Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. | | | | | | | |
| Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. | | | | | | | |

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| 37 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. | | | | | | \$ | |
|----|--|---|---|--|--|--|----|--|
| 38 | Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. | | | | | | \$ | |
| 39 | cloth Natio | itional food and clothing expensing expenses exceed the combine onal Standards, not to exceed 5% v.usdoj.gov/ust/ or from the clerk tional amount claimed is reason | ed allowan of those of of the bar | nces for food and clothic combined allowances. (nkruptcy court.) You m | ing (apparel and so (This information | ervices) in the IRS is available at | \$ | |
| 40 | | tinued charitable contributions or financial instruments to a char | | | | | \$ | |
| 41 | Tota | l Additional Expense Deduction | ns under | § 707(b). Enter the total | al of Lines 34 thro | ough 40 | \$ | |
| | | S | ubpart C | : Deductions for Deb | t Payment | | | |
| | Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42. | | | | | | | |
| 42 | | Name of Creditor | Property Securing the Debt | | Average Monthly Payment | Does payment include taxes or insurance? | | |
| | a. | | | | \$ | ☐ yes ☐ no | | |
| | b. | | | | \$ | ☐ yes ☐ no | | |
| | c. | | | | \$ | ☐ yes ☐ no | | |
| | | | | Total: Add | lines a, b and c. | \$ | | |
| | Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. | | | | | | | |
| 43 | | Name of Creditor | | Property Securing the | e Debt | 1/60th of the Cure Amount | | |
| | a. | | | | | \$ | | |
| | b. | | | | | \$ | | |
| | c. | | | | | \$ | | |
| | | | | | Total: Ad | ld lines a, b and c. | \$ | |
| 44 | Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your | | | | | | \$ | |

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| | follo | pter 13 administrative expenses. If you are eligible to file a cwing chart, multiply the amount in line a by the amount in line inistrative expense. | | | | | | | |
|----|---|---|--------------------------------------|----|--|--|--|--|--|
| | a. Projected average monthly chapter 13 plan payment. \$ | | | | | | | | |
| 45 | b. | Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | X | | | | | | |
| | c. | Average monthly administrative expense of chapter 13 case | Total: Multiply Lines a and b | \$ | | | | | |
| 46 | Tota | l Deductions for Debt Payment. Enter the total of Lines 42 th | hrough 45. | \$ | | | | | |
| | | Subpart D: Total Deductions | from Income | | | | | | |
| 47 | Tota | ol of all deductions allowed under § 707(b)(2). Enter the total | l of Lines 33, 41, and 46. | \$ | | | | | |
| | | Part VI. DETERMINATION OF § 707 | 7(b)(2) PRESUMPTION | | | | | | |
| 48 | Ente | er the amount from Line 18 (Current monthly income for § | 707(b)(2)) | \$ | | | | | |
| 49 | Ente | er the amount from Line 47 (Total of all deductions allowed | l under § 707(b)(2)) | \$ | | | | | |
| 50 | Mon | thly disposable income under § 707(b)(2). Subtract Line 49 | from Line 48 and enter the result. | \$ | | | | | |
| 51 | | nonth disposable income under § 707(b)(2). Multiply the ame the result. | ount in Line 50 by the number 60 and | \$ | | | | | |
| | Initi | al presumption determination. Check the applicable box and | proceed as directed. | | | | | | |
| | ☐ The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. | | | | | | | | |
| 52 | ☐ The amount set forth on Line 51 is more than \$10,950. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. | | | | | | | | |
| | The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of H though 55). | | | | | | | | |
| 53 | Enter the amount of your total non-priority unsecured debt | | | | | | | | |
| 54 | Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result. | | | | | | | | |
| | Seco | ndary presumption determination. Check the applicable box | x and proceed as directed. | | | | | | |
| 55 | The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption do the top of page 1 of this statement, and complete the verification in Part VIII. | | | | | | | | |
| | The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also VII. | | | | | | | | |

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Part VII. ADDITIONAL EXPENSE CLAIMS

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

| | Expense Description | Monthly Amount |
|----|-----------------------------|----------------|
| a. | | \$ |
| b. | | \$ |
| c. | | \$ |
| | Total: Add Lines a, b and c | \$ |

Part VIII. VERIFICATION

| I declare under penalty | of perjury that the inform | nation provided in this s | statement is true and correc | ct. (<i>If this a joint case</i> , |
|-------------------------|----------------------------|---------------------------|------------------------------|-------------------------------------|
| both debtors must sign | ı.) | | | |

57 Date

56

| Date: April 27, 2009 | Signature: /s/ Chom Beireis | | |
|-----------------------------|-----------------------------|----------|--|
| | | (Debtor) | |
| | | | |

Date: ______ Signature: _____ (Joint Debtor, if any)

| Case 09-15084 Do B1 (Official Form 1) (1/08) | c 1 | Filed 04/27/09 Document | Entered (Page 9 of | | 9 18:34:5 | 51 Des | sc Main |
|--|--|--|--|---|--|-----------------------------------|--|
| | | tes Bankruptcy Co | ourt | <u> </u> | | Volu | ntary Petition |
| Name of Debtor (if individual, enter Last, First, Maries, Chom | | | Name of Joint D | Debtor (Spou | se) (Last, First | , Middle): | |
| All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names): | All Other Name (include married | | | | vears | | |
| Last four digits of Soc. Sec. or Individual-Taxpay EIN (if more than one, state all): 6273 | er I.E | D. (ITIN) No./Complete | Last four digits EIN (if more tha | | | Taxpayer I.D. | (ITIN) No./Complete |
| Street Address of Debtor (No. & Street, City, Sta 708 West Miller Road | te & 2 | Zip Code): | Street Address of | of Joint Debt | or (No. & Stre | et, City, State | e & Zip Code): |
| Des Plaines, IL | 2 | ZIPCODE 60016 | 1 | | | Z | IPCODE |
| County of Residence or of the Principal Place of Cook | Busin | ess: | County of Resid | dence or of th | ne Principal Pla | ace of Busine | ss: |
| Mailing Address of Debtor (if different from stre | et add | dress) | Mailing Address | s of Joint De | btor (if differen | nt from street | address): |
| | | ZIPCODE | 1 | | | Z | IPCODE |
| Location of Principal Assets of Business Debtor | | | ove): | | | | |
| | | | | | | Z | IPCODE |
| Type of Debtor | | Nature of B | | | _ | | Code Under Which Check one box.) |
| (Form of Organization) (Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities check this box and state type of entity below.) | (Check one box.) Health Care Business Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) Railroad Stockbroker Commodity Broker Clearing Bank Other | | Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 13 | | Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box.) | | |
| Tax-Exemp (Check box, if a Debtor is a tax-exempt Title 26 of the United S Internal Revenue Code | | | applicable.) organization under states Code (the | deb § 10 r indi | bts are primari ts, defined in 1 01(8) as "incur ividual primari sonal, family, o d purpose." | 1 U.S.C. red by an ly for a | Debts are primarily business debts. |
| Filing Fee (Check one | box) |) | Check one box: | | Chapter 11 | Debtors | |
| ✓ Full Filing Fee attached ☐ Filing Fee to be paid in installments (Applicab attach signed application for the court's consid is unable to pay fee except in installments. Rul 3A. | eratio e 100 | on certifying that the debtor 16(b). See Official Form | Debtor is a sr Debtor is not Check if: Debtor's aggraffiliates are | mall business a small busi regate nonco less than \$2, | ness debtor as ntingent liquid 190,000. | defined in 11 | S.C. § 101(51D). U.S.C. § 101(51D). ved to non-insiders or |
| Filing Fee waiver requested (Applicable to cha attach signed application for the court's consid | | | | ng filed with of the plan w | this petition | | m one or more classes of |
| Statistical/Administrative Information Debtor estimates that funds will be available Debtor estimates that, after any exempt propedistribution to unsecured creditors. | | | | ere will be no | o funds availab | ele for | THIS SPACE IS FOR COURT USE ONLY |
| 1-49 50-99 100-199 200-999 |] 1,000 5,000 | | ,001- 25,0 ,000 50,0 | 001- 000 | 50,001- 100,000 | Over 100,000 | |
| Estimated Assets State | | | | 0,000,001 500 million | \$500,000,001 to \$1 billion | | |

Estimated Liabilities

| Prior Bankruptcy Case Filed Within Last | ${f 8\ Years}$ (If more than two, attach | additional sheet) |
|--|--|---|
| Location Where Filed: None | Case Number: | Date Filed: |
| Location Where Filed: | Case Number: | Date Filed: |
| Pending Bankruptcy Case Filed by any Spouse, Partner or | Affiliate of this Debtor (If mo | re than one, attach additional sheet) |
| Name of Debtor: None | Case Number: | Date Filed: |
| District: | Relationship: | Judge: |
| Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition. | (To be completed whose debts are properties of the petitioner of that I have informed the petition chapter 7, 11, 12, or 13 of the explained the relief available under the complete of the co | if debtor is an individual rimarily consumer debts.) mamed in the foregoing petition, declar ner that [he or she] may proceed under the 11, United States Code, and have der each such chapter. I further certified he notice required by § 342(b) of the |
| | X /s/ Hyun S Kim | 4/27/09 |
| | Signature of Attorney for Debtor(s) | Date |
| (To be completed by every individual debtor. If a joint petition is filed, e Exhibit D completed and signed by the debtor is attached and ma If this is a joint petition: | ade a part of this petition. | ch a separate Exhibit D.) |
| Exhibit D also completed and signed by the joint debtor is attach | ed a made a part of this petition. | |
| | | is District for 180 days immediately |
| ☐ There is a bankruptcy case concerning debtor's affiliate, general | , , | this District. |
| Debtor is a debtor in a foreign proceeding and has its principal princ | lace of business or principal assets but is a defendant in an action or pr | in the United States in this District, occeding [in a federal or state court] |
| Certification by a Debtor Who Resident | | Property |
| (Check all app Landlord has a judgment against the debtor for possession of debtor | blicable boxes.) otor's residence. (If box checked, c | omplete the following.) |
| (Name of landlord or less | or that obtained judgment) | |
| (Address of lar | ndlord or lessor) | |

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
 Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Case 09-15084 B1 (Official Form 1) (1/08)

filing of the petition.

(This page must be completed and filed in every case)

Voluntary Petition

Doc 1

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Document

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Page 2

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Name of Debtor(s):

Beireis, Chom

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s): Beireis, Chom

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Chom Beireis

Signature of Debtor

Chom Beireis

Х

Signature of Joint Debtor

(904) 806-5838

Telephone Number (If not represented by attorney)

April 27, 2009

Date

Signature of Attorney*

X /s/Hyun S Kim

Signature of Attorney for Debtor(s)

Hyun S Kim 6244603

Printed Name of Attorney for Debtor(s)

Shawn S. Kim, Attorney at Law

Firm Name

3758 West Montrose Ave.

Address

Chicago, IL 60618

(773) 604-8877

Telephone Number

April 27, 2009

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

| X | |
|---|--|
| | |

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- ☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

| X | |
|---|--|
| | |

Signature of Foreign Representative

Printed Name of Foreign Representative

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

Case 09-15084 Official Form 1, Exhibit D (10/06)

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Page 12 of 37 Document **United States Bankruptcy Court**

Northern District of Illinois

| IN RE: | | Case No. |
|---------------|-----------|-----------|
| Beireis, Chom | | Chapter 7 |
| | Debtor(s) | • |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by

| the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in |
|---|
| performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the |
| certificate and a copy of any debt repayment plan developed through the agency. |
| 2. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by |
| the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in |

the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed

| uninstea. |
|--|
| 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by motion for determination by the court.] |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); |
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, t participate in a credit counseling briefing in person, by telephone, or through the Internet.); |
| Active military duty in a military combat zone. |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(I does not apply in this district. |

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Chom Beireis

Date: April 27, 2009

Certificate Number: 01267-TXS-CC-006841379

CERTIFICATE OF COUNSELING

| I CERTIFY that on April 24, 2009 | , at | 9:20 | o'clock AM CDT, |
|---|------------|---------------|-----------------------------------|
| Chom O Beireis | | receive | ed from |
| Money Management International, Inc. | | | , |
| an agency approved pursuant to 11 U.S.C. | § 111 to | provide cred | it counseling in the |
| Southern District of Texas | , a | n individual | [or group] briefing that complied |
| with the provisions of 11 U.S.C. §§ 109(h) | and 111 | | |
| A debt repayment plan was not prepared | If a d | lebt repaymer | nt plan was prepared, a copy of |
| the debt repayment plan is attached to this | certificat | e. | |
| This counseling session was conducted by | internet a | nd telephone | · |
| | | | |
| Date: April 24, 2009 | Ву | /s/Traci Jean | |
| | Name | Traci Jean | |
| | Title | Counselor I | |

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

113 604 5138

B6 Summary (Case 09-15084, Doc 1

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Document Page 14 of 37 United States Bankruptcy Court **Northern District of Illinois**

| IN RE: | | Case No. |
|---------------|-----------|-----------|
| Beireis, Chom | | Chapter 7 |
| | Debtor(s) | • |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NUMBER OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|---------------------|-----------------|-----------------|-------------|
| A - Real Property | Yes | 1 | \$ 1,090,000.00 | | |
| B - Personal Property | Yes | 3 | \$ 26,100.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | \$ 1,322,100.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | \$ 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 2 | | \$ 62,113.00 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | \$ 1,500.00 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 1 | | | \$ 750.00 |
| | TOTAL | 13 | \$ 1,116,100.00 | \$ 1,384,213.00 | |

Form 6 - Statistical Summary (1207)

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| IN RE: | | Case No |
|---------------|-----------|-----------|
| Beireis, Chom | | Chapter 7 |
| | Debtor(s) | • |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|------------|
| Domestic Support Obligations (from Schedule E) | \$ 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00 |
| Student Loan Obligations (from Schedule F) | \$ 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ 0.00 |
| TOTAL | \$ 0.00 |

State the following:

| Average Income (from Schedule I, Line 16) | \$ 1,500.00 |
|---|----------------|
| Average Expenses (from Schedule J, Line 18) | \$ 750.00 |
| Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C | |
| Line 20) | \$ 1,500.00 |

State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 210,500.00 |
|--|---------|------------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | | \$ 62,113.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$ 272,613.00 |

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(If known)

IN RE Beireis, Chom

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Debtor(s)

Doc 1

Case No.

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTORS INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|---|--|---------------------------------------|---|----------------------------|
| Commercial Property at 1249 S. Elmhurst Road, Des Plaines, IL | Fee Simple | | 750,000.00 | 960,500.00 |
| Single Family House 708 Millers Road, Des Plaines, IL 60016 | | | 340,000.00 | 340,000.00 |
| | | | | |
| | | | | |

TOTAL

1,090,000.00

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(If known)

IN RE Beireis, Chom

Debtor(s)

Doc 1

Case No. __

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|-----|---|------------------|--|---------------------------------------|--|
| 1. | Cash on hand. | Х | | | |
| | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Checking Account | | 300.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | Х | | | |
| 4. | Household goods and furnishings, include audio, video, and computer equipment. | | Household Goods and Furnishngs | | 500.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | Х | | | |
| 6. | Wearing apparel. | | Necessary Wearing Apparel | | 300.00 |
| 7. | Furs and jewelry. | Х | | | |
| 8. | Firearms and sports, photographic, and other hobby equipment. | Х | | | |
| 9. | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | Х | | | |
| 10. | Annuities. Itemize and name each issue. | Х | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | | Stock in Samwon Garden, Inc Restaurant closed in April of 2008 | | 0.00 |
| 14. | Interests in partnerships or joint ventures. Itemize. | Х | | | |
| | | | | | |

| B6B (Official Form 8B) | 9545084 |
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IN RE Beireis, Chom

Debtor(s)

_ Case No. _ (If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|-----|---|------------------|--------------------------------------|---------------------------------------|--|
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars. | Х | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | Х | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | Х | | | |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | Х | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | Х | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | | 2004 Lexus LX470 | | 25,000.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| 31. | Animals. | X | | | |
| 32. | Crops - growing or harvested. Give particulars. | Х | | | |
| | | | | | |

| B6B (Official FCASE) 99.15984 | Doc 1 | Filed 04/27/09 | Entered 04/27/09 18:34:51 |
|--------------------------------------|-------|----------------|---------------------------|
| SOB (Official Form OB) (12/07) Cont. | | Document | Page 10 of 37 |

Debtor(s)

Case No. _ (If known)

Desc Main

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|------------------|--------------------------------------|---------------------------------------|--|
| 33. Farming equipment and implements. | Х | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |
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IN RE Beireis, Chom

Debtor(s)

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: $(Check\ one\ box)$

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

Case No. _

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|--|--|--|
| | | |
| 735 ILCS 5 §12-901 | 15,000.00 | 340,000.00 |
| | | |
| 735 ILCS 5 §12-1001(b) | 300.00 | 300.00 |
| 735 ILCS 5 §12-1001(b) | 500.00 | 500.00 |
| 735 ILCS 5 §12-1001(a) | 300.00 | 300.00 |
| 735 ILCS 5 §12-1001(c) 735 ILCS 5 §12-1001(b) | 2,400.00 1,000.00 | 25,000.00 |
| | | |
| | 735 ILCS 5 §12-901 735 ILCS 5 §12-1001(b) 735 ILCS 5 §12-1001(b) 735 ILCS 5 §12-1001(a) | 735 ILCS 5 §12-901 15,000.00 735 ILCS 5 §12-1001(b) 300.00 735 ILCS 5 §12-1001(b) 500.00 735 ILCS 5 §12-1001(a) 300.00 735 ILCS 5 §12-1001(c) 2,400.00 |

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(If known)

IN RE Beireis, Chom

Debtor(s)

Doc 1

Case No.

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|----------|---------------------------------------|--|------------|--------------|----------|---|------------------------------|
| ACCOUNT NO. 169216157 | | | 05/2007 Mortgage Loanon 708 Miller | | | | 340,000.00 | |
| Countrywide PO Box 650070 Dallas, TX 75265 | | | Road Property | | | | | |
| | | | VALUE \$ 340,000.00 | | | | | |
| ACCOUNT NO. 0861087468 | | | 2004 Auto Loan | | | | 21,600.00 | |
| Fifth Third Bank PO Box 630778 Cincinnati, OH 45263 | | | | | | | | |
| | | | VALUE \$ 25,000.00 | | | | | |
| ACCOUNT NO. 2000980; 2001280; 1001969 | | | 2007 Mortgage Loan | | | | 960,500.00 | 210,500.00 |
| Foster Bank 5225 N. Kedzie Chicago, IL 60625 | | | | | | | | |
| | | | VALUE \$ 750,000.00 | | | | | |
| ACCOUNT NO. | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | VALUE \$ | | | | | |
| ocntinuation sheets attached | • | • | (Total of th | | otota | al e) | \$ 1,322,100.00 | \$ 210,500.00 |
| | | | | • | Tota | al | | . 040 500 00 |

|\$ 1,322,100.00|\$ 210,500.00 (Use only on last page)

> (Report also on Summary of

(If applicable, report also on Statistical Schedules.) Summary of Certain Liabilities and Related Data.)

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Case No.

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Debtor(s)

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| Stati | Such Summary of Certain Liabilities and Related Data. |
|----------|---|
| liste | eport the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority d on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on statistical Summary of Certain Liabilities and Related Data. |
| V | Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TY | PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| | Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| | Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| | Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| | Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| | Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| | Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| | Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| | Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| | Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |
| | * Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment. |
| | 0 continuation sheets attached |

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IN RE Beireis, Chom

Desc Main

(If known)

Debtor(s)

Case No.

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|----------|---------------------------------------|--|-------------|--------------|----------|---|
| ACCOUNT NO. 0-41003 | | | 2008 Credit Card Debt | | | | |
| American Express PO Box 981535 El Paso, TX 79998 | | | | | | | 1,700.00 |
| ACCOUNT NO. 5491-1303-7866-9436 | | | 2007 Credit Card Debt | | | | -,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| AT&T Universal Card PO Box 6940 The Lakes, NV 88901 | | | | | | | 19,000.00 |
| ACCOUNT NO. 831215-00-427876-7 | | | 2007 Credit Card Debt | | | | ., |
| Beneficial PO Box 9068 Brandon, FL 33509 | | | | | | | 8,300.00 |
| ACCOUNT NO. 20000048775 | | | 2008 Phone Bill | П | | | |
| CCS, Inc. %Helio PO Box 22630 Cleveland, OH 44122 | | | | | | | 1,100.00 |
| 4 | | | | Sub | | | * 20.400.00 |
| 1 continuation sheets attached | | | (Total of thi | | age Tota | ı | \$ 30,100.00 |
| | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St Summary of Certain Liabilities and Related | als atis | o o | n ıl | \$ |
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IN RE Beireis, Chom

Debtor(s)

_ Case No. _

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (, | Continuation Sheet) | | | | |
|---|----------|---------------------------------------|---|-------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 5401-6830-3987-6344 | | | 2007 Credit Card Debt | П | | | |
| Chase PO Box 15298 Wilmington, DE 19850 | | | | | | | 7,400.00 |
| ACCOUNT NO. 4128-0038-7546-4128 | | | 2007 Credit Card Debt | | | | |
| Citi Bank PO Box 6000 The Lakes, NV 89163 | | | | | | | 15,900.00 |
| ACCOUNT NO. 5749 | | | 2007 Credit Card Debt | Н | | 1 | 10,000.00 |
| Discover Card PO Box 30395 Salt Lake City, UT 84130 | | | | | | | 4,900.00 |
| ACCOUNT NO. 001-017794 | | | 2008 Phone Bill | Н | | + | 4,000.00 |
| KISB 3550 Wilshire Blvd., Suite 900 Los Angelos, CA 90010 | | | | | | | 40.00 |
| ACCOUNT NO. 10486423 | | | 2008 Loan | H | | + | 40.00 |
| RAB, Inc. % Fifth Third Bank PO Box 34111 Memphis, TN 38016 | | | 2000 Louis | | | | 1,473.00 |
| ACCOUNT NO. 5121-0750-8492-3445 | | | 2007 Credit Card Debt | Н | | + | 1,470.00 |
| Sears Credit Cards PO Box 183082 Columbus, OH 43218 | | | | | | | |
| LOGOVINE VO KWON V Poincia 00 OU 0440 | H | | 2006 Complaint alleging Violation of Illinois Real | H | | + | 2,300.00 |
| ACCOUNT NO. Kwon v Beireis 06 CH 8440 Tim Riteley, Esq % Yoo Kwon 70 W Madison, 31st Floor Chicago, IL 60603 | | | Property Disclosure Act | | | | |
| Short no. 1 of 1ii | | | | | he ' | + | 0.00 |
| Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of th | Sub is p | | | 32,013.00 |
| | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate | als atis | tica | n ıl | § 62,113.00 |

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| N DE Bairais Cham | | | Case No. | | |

Debtor(s)

(If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
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Debtor(s)

(If known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
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IN RE Beireis, Chom

Debtor(s)

Case No.

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

| Debtor's Marital Status DEPENDENTS OF DEBTOR AND SPOUSE | | | | | | |
|---|---|---------------|------------|----------|------------|--------|
| Single | RELATIONSHIP(S): | | | | AGE(S) |): |
| | | | | | | |
| EMPLOYMENT: | DEBTOR | | | SPOUSE | | |
| Occupation | | | | | | |
| Name of Employer | | | | | | |
| How long employed | | | | | | |
| Address of Employer | | | | | | |
| INCOME: (Estimate of ave | erage or projected monthly income at time case filed) | | | DEBTOR | | SPOUSE |
| | ages, salary, and commissions (prorate if not paid mon | thly) | \$ | | \$ | |
| 2. Estimated monthly overti | | 3, | \$ | | \$ | |
| 3. SUBTOTAL | | | \$ | 0.00 | \$ | |
| 4. LESS PAYROLL DEDU | CTIONS | | - | | | |
| a. Payroll taxes and Socia | | | \$ | | \$ | |
| b. Insurance | • | | \$ | | \$ | |
| c. Union dues | | | \$ | | \$ | |
| d. Other (specify) | | | \$ | | \$ | |
| | | | \$ | | \$ | |
| 5. SUBTOTAL OF PAYR | OLL DEDUCTIONS | | \$ | 0.00 | \$ | |
| 6. TOTAL NET MONTH | LY TAKE HOME PAY | | \$ | 0.00 | \$ | |
| 7. Regular income from ope | eration of business or profession or farm (attach detaile | ed statement) | \$ | | \$ | |
| 8. Income from real propert | y | | \$ | | \$ | |
| 9. Interest and dividends | | | \$ | | \$ | |
| | or support payments payable to the debtor for the debtor | or's use or | | | | |
| that of dependents listed abo | | | \$ | | \$ | |
| 11. Social Security or other | | | ¢. | | ¢. | |
| (Specify) | | | ₽ — | | e — | |
| 12. Pension or retirement in | come | | \$ | | \$ | |
| 13. Other monthly income | conc | | Ψ | | Ψ | |
| (Specify) Assistance Fro | om Family | | \$ | 1,500.00 | \$ | |
| Y | • | | \$ | , | \$ | |
| | | | \$ | | \$ | |
| 14. SUBTOTAL OF LINE | S 7 THROUGH 13 | | \$ | 1,500.00 | \$ | |
| 15. AVERAGE MONTHL | Y INCOME (Add amounts shown on lines 6 and 14) | | \$ | 1,500.00 | \$ | |
| | GE MONTHLY INCOME: (Combine column totals | from line 15; | | | | |
| if there is only one debtor re | epeat total reported on line 15) | | | \$ | 1,500. | .00 |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None**

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(If known)

IN RE Beireis, Chom

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Debtor(s)

Case No. _

| SCHEDULE J - | CURRENT | EXPENDITURES | OF INDIVIDUAL | DEBTOR(S) |
|-----------------|---------|---------------------|---------------|-----------|
| O CILLO C LLL 0 | CCILLIA | | | |

| SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR | (S) | |
|---|------------------------------------|--------------------------------|
| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the dependent of the properties of the dependent of the properties of the debtor and the debtor and the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the debtor family at time case filed. | any payments n ductions from in | nade biweekly ncome allowed |
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete expenditures labeled "Spouse." | a separate s | schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | |
| a. Are real estate taxes included? Yes No | | |
| b. Is property insurance included? Yes No | | |
| 2. Utilities: | ¢ | |
| a. Electricity and heating fuel b. Water and sewer | \$ | |
| | \$ —— | |
| c. Telephone | \$ | |
| d. Other | — | |
| 2. Home maintanence (nameins and unksem) | | |
| 3. Home maintenance (repairs and upkeep) 4. Food | | |
| 5. Clothing | | |
| 6. Laundry and dry cleaning | | |
| 7. Medical and dental expenses | | |
| 8. Transportation (not including car payments) | | |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | Ψ ——— | |
| 10. Charitable contributions | \$ ——— | |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | Ψ | |
| a. Homeowner's or renter's | \$ | |
| b. Life | | |
| c. Health | \$ | |
| d. Auto | | |
| e. Other | \$ | |
| | \$ | |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | Ψ | |
| (Specify) | \$ | |
| | \$ | |
| 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) | ' | |
| a. Auto | \$ | 750.00 |
| b. Other | \$ | |
| | \$ | |
| 14. Alimony, maintenance, and support paid to others | \$ | |
| 15. Payments for support of additional dependents not living at your home | \$ | |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | |
| 17. Other | \$ | |
| | \$ | |
| | \$ | |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if | | |
| applicable, on the Statistical Summary of Certain Liabilities and Related Data. | \$ | 750.00 |
| | | |
| 10. Describe any inarcase or decrease in expanditures entisinated to account within the year fellowing the filing of | f this down | ant. |

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document: None

20. STATEMENT OF MONTHLY NET INCOME

| a. Average monthly income from Line 15 of Schedule I | \$1,500.00 |
|--|------------|
| b. Average monthly expenses from Line 18 above | \$ 750.00 |
| c. Monthly net income (a. minus b.) | \$ 750.00 |

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Document

Case No.

IN RE Beireis, Chom

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Debtor(s)

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 15 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: **April 27, 2009** Signature: /s/ Chom Beireis Debtor **Chom Beireis** Signature: (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the ___ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of ______ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief. Signature: (Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

 $_{B7\ (Official\ Fo}$ Case 209-15084

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Desc Main

Document Page 30 of 37 **United States Bankruptcy Court**

Northern District of Illinois

| IN RE: | | Case No. |
|---------------|-----------|-----------|
| Beireis, Chom | | Chapter 7 |
| • | Debtor(s) | 1 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. I1 U.S.C. § 101.

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

0.00 01/01/09 to Present - \$0.00 2008 - \$2863.00

2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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7. Gifts

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the** commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE **Hyun Kim**

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 03/24/09

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 600.00

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3758 W. Montrose Ave. Chicago, IL 60618

10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Checking # 0003138724

TYPE AND NUMBER OF ACCOUNT

AND AMOUNT OF FINAL BALANCE

NAME AND ADDRESS OF INSTITUTION **Foster Bank** 5225 N. Kedzie Chicago, IL 60625

Foster Bank

Checking #0003067469 \$0.00 March 2009

AMOUNT AND DATE OF SALE

OR CLOSING

\$0.00 March 2009

12. Safe deposit boxes

5225 N. Kedzie Chicago, IL 60625

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

List all property owned by another person that the debtor holds or controls.

 \checkmark

15. Prior address of debtor

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

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17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 \checkmark

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date: April 27, 2009 | Signature /s/ Chom Beireis | |
|----------------------|-------------------------------|--------------|
| | of Debtor | Chom Beireis |
| Date: | Signature | |
| | of Joint Debtor | |
| | (if any) | |
| | O continuation pages attached | |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

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| IN RE: | | Case No. |
|---|--|---|
| Beireis, Chom | Chapter 7 | |
| Debt | or(s) | • |
| CHAPTER 7 IND | IVIDUAL DEBTOR'S STATE | EMENT OF INTENTION |
| ✓ I have filed a schedule of assets and liabilities v ☐ I have filed a schedule of executory contracts an ✓ I intend to do the following with respect to the | nd unexpired leases which includes pers | rsonal property subject to an unexpired lease. |
| Description of Secured Property | Creditor's Name | Property will claimed as pursuant to 11 pursuant to 11 be Surrendered exempt U.S.C. § 722 U.S.C. § 524(c |
| Single Family House 708 Millers Road, Des 2004 Lexus LX470 Commercial Property at 1249 S. Elmhurst | Fifth Third Bank | ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ |
| | | Lease will be assumed pursuant to 11 U.S.C. § |
| Description of Leased Property | Lessor's Name | 362(h)(1)(A) |
| | Debtor | Joint Debtor (if applicable |
| | | com 2 coor (n appround |
| I declare under penalty of perjury that: (1) I am compensation and have provided the debtor with a and 342 (b); and, (3) if rules or guidelines have be | a bankruptcy petition preparer as defined the above of this document and the notices are promulgated pursuant to 11 U.S.C. tor notice of the maximum amount before | fined in 11 U.S.C. § 110; (2) I prepared this document for and information required under 11 U.S.C. §§ 110(b), 110(b); C. § 110(h) setting a maximum fee for services chargeable before preparing any document for filing for a debtor or accepting |
| Printed or Typed Name and Title, if any, of Bankruptcy P If the bankruptcy petition preparer is not an indi- responsible person, or partner who signs the docu- | Social Security No. (Required by 11 U.S.C. § 110.) address, and social security number of the officer, principal | |
| Address | | |
| Signature of Bankruptcy Petition Preparer | Date | |
| Names and Social Security numbers of all other indis not an individual: | ividuals who prepared or assisted in prep | eparing this document, unless the bankruptcy petition prepare |

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A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

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Beireis, Chom

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

Number of Creditors _____14

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: April 27, 2009

/s/ Chom Beireis
Debtor

Joint Debtor

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Beireis, Chom 708 West Miller Road Des Plaines, IL 60016 Document Fifth Third Bank PO Box 630778 Cincinnati, OH 45263

Shawn S. Kim, Attorney at Law 3758 West Montrose Ave. Chicago, IL 60618

Foster Bank 5225 N. Kedzie Chicago, IL 60625

American Express PO Box 981535 El Paso, TX 79998 **KISB** 3550 Wilshire Blvd., Suite 900 Los Angelos, CA 90010

AT&T Universal Card PO Box 6940

The Lakes, NV 88901

PO Box 34111 Memphis, TN 38016

Beneficial PO Box 9068 Brandon, FL 33509 **Sears Credit Cards** PO Box 183082 Columbus, OH 43218

% Fifth Third Bank

RAB, Inc.

CCS, Inc. %Helio PO Box 22630 Cleveland, OH 44122 Tim Riteley, Esq % Yoo Kwon 70 W Madison, 31st Floor Chicago, IL 60603

Chase PO Box 15298 Wilmington, DE 19850

Citi Bank PO Box 6000 The Lakes, NV 89163

Countrywide PO Box 650070 Dallas, TX 75265

Discover Card PO Box 30395 Salt Lake City, UT 84130

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| IN RE: | | | Case No. | |
|--------|--|--|---|--|
| Вє | eireis, Chom | | Chapter 7 | |
| | • | ebtor(s) | | |
| | DISCLOSURE | OF COMPENSATION | OF ATTORNEY FOR DEBTOR | |
| 1. | | aptcy, or agreed to be paid to me, for | attorney for the above-named debtor(s) and that compensation paid to me within or services rendered or to be rendered on behalf of the debtor(s) in contemplation | |
| | For legal services, I have agreed to accept | | \$\$,200.00 | |
| | Prior to the filing of this statement I have received | t | \$600.00 | |
| | Balance Due | | \$600.00 | |
| 2. | The source of the compensation paid to me was: | Debtor Other (specify): | | |
| 3. | The source of compensation to be paid to me is: | Debtor Other (specify): | | |
| 4. | ✓ I have not agreed to share the above-disclose | d compensation with any other pers | son unless they are members and associates of my law firm. | |
| | I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement together with a list of the names of the people sharing in the compensation, is attached. | | | |
| 5. | In return for the above-disclosed fee, I have agree | d to render legal service for all aspe | ects of the bankruptcy case, including: | |
| | b. Preparation and filing of any petition, scheduc. Representation of the debtor at the meeting of | lles, statement of affairs and plan w of creditors and confirmation hearing | g, and any adjourned hearings thereof; | |
| | d. Representation of the debtor in adversary pre e. [Other provisions as needed] | eeedings and other contested bankr | uptey matters ; | |
| 6. | By agreement with the debtor(s), the above disclo | sed fee does not include the followi | ng services: | |
| | certify that the foregoing is a complete statement of proceeding. | CERTIFICAT any agreement or arrangement for | PION payment to me for representation of the debtor(s) in this bankruptcy | |
| | April 27, 2009 | /s/ Hyun S Kim | | |
| - | Date | | Signature of Attorney | |

Shawn S. Kim, Attorney at Law

Name of Law Firm